

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005841

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: VEINRX INC.

**Current Principal Place of Business:**

8210 NW 27TH STREET  
MIAMI, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

8210 NW 27TH STREET  
MIAMI, FL 33122

**New Mailing Address:**

FEI Number: 20-0410180      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOPEZ, OSCAR  
8210 NW 27TH STREET  
MIAMI, FL 33122    US

**Name and Address of New Registered Agent:**

MURPHY, EDWARD G  
8210 NW 27TH STREET  
MIAMI, FL 33122    US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDWARD G MURPHY      04/28/2008  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPS      ( ) Delete  
Name: JAHRMARKT, SCOTT L  
Address: 8210 NW 27TH STREET  
City-St-Zip: MIAMI, FL 33122

Title: DVP      ( ) Delete  
Name: LOPEZ, OSCAR  
Address: 8210 NW 27TH STREET  
City-St-Zip: MIAMI, FL 33122

Title: D      ( ) Delete  
Name: LIN, RICHARD  
Address: 8210 N. W. 27 STREET  
City-St-Zip: MIAMI, FL 33122

Title: D      ( ) Delete  
Name: COLLINSON, JEFFREY  
Address: 8210 N. W. 27 STREET  
City-St-Zip: MIAMI, FL 33122

Title: D      ( ) Delete  
Name: HAYES, KENNETH G  
Address: 8210 NW 27 ST  
City-St-Zip: MIAMI, FL 33122

Title: D      ( ) Delete  
Name: MAUNEY, DAVID  
Address: 8210 NW 27 ST  
City-St-Zip: MIAMI, FL 33122

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CFO      (X) Change ( ) Addition  
Name: MURPHY, EDWARD G  
Address: 8210 NW 27TH STREET  
City-St-Zip: MIAMI, FL 33122

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD G MURPHY      CFO      04/28/2008  
Electronic Signature of Signing Officer or Director      Date